CDC FACT SHEET

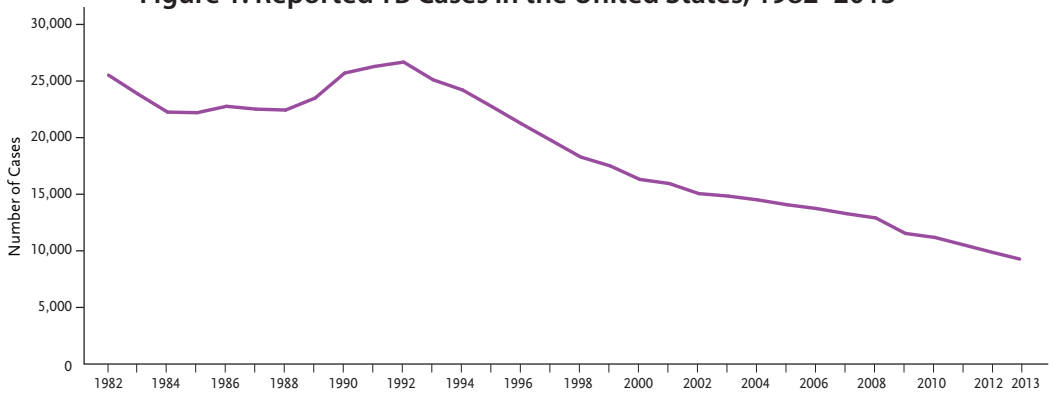
# TB in the United States: A Snapshot, 2013

**This fact sheet summarizes national data published in CDC's annual surveillance report, "Reported Tuberculosis in the United States, 2013" (available at www.cdc.gov/tb).**

## National Overview

- The latest national surveillance data show that tuberculosis (TB) has reached an all-time low in the United States. In 2013, a total of 9,582 cases were reported.
- The TB rate declined 4.3 percent from 2012 to 2013, to 3.0 cases per 100,000 population.
- Estimates suggest that TB prevention and control efforts in the U.S. have helped to prevent more than 200,000 cases since 1993.[1]
- Four states (California, Texas, New York, and Florida) account for more than half of all TB cases (51 percent or 4,917 cases).

**Figure 1. Reported TB Cases in the United States, 1982–2013**



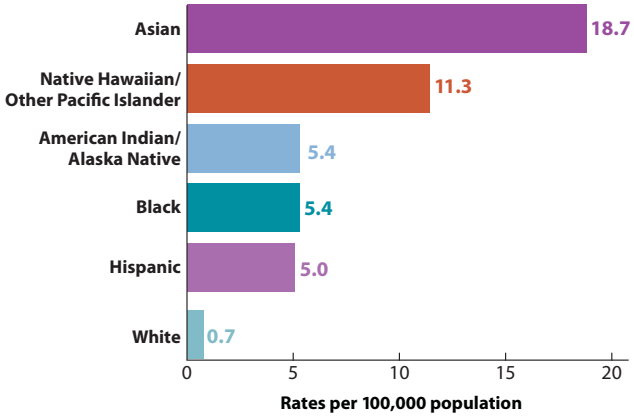

*The resurgence of TB in the mid-1980s was marked by several years of increasing case counts until its peak in 1992. Case counts began decreasing again in 1993, and 2013 marks the 21st year of decline in the total number of TB cases reported in the United States since the peak of the resurgence.*

## Most-Affected Populations

### Racial/Ethnic Disparities Persist

- Although TB rates declined among all racial and ethnic groups, TB rates among racial/ethnic minorities are much higher than those of whites. Rates for Asians (18.7/100,000), blacks (5.4), and Hispanics (5.0) were approximately 26, eight and seven times higher than among whites (0.7), respectively.
- American Indians/Alaska Natives and Native Hawaiian/Other Pacific Islanders each accounted for only one percent of all TB cases; however, rates among these groups (5.4 and 11.3) are relatively high.

**Figure 2. TB Rates by Race/Ethnicity, 2013**




- More TB cases are reported among Asians than any other racial/ethnic group (3,005 total cases).

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Centers for Disease Control and Prevention

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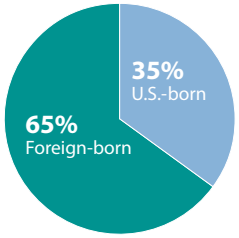
## Foreign-Born Individuals Bear Significant Burden

Figure 3. Proportion of TB Cases by National Origin, 2013




- Despite declines in the rates of TB among both foreign-born and U.S.-born individuals, the TB rate among foreign-born individuals (15.6/100,000) was 13 times higher than among U.S.-born individuals (1.2).
- The proportion of cases occurring among foreign-born individuals has steadily increased since 1993, now accounting for 65 percent of total cases.
- Among individuals with TB and a known place of birth, approximately 95 percent of Asians, 76 percent of Hispanics, 40 percent of blacks, 27 percent of Native Hawaiians/other Pacific Islanders, and 23 percent of whites were foreign born.
- More than half (54 percent) of foreign-born TB patients originated from five countries (Mexico, the Philippines, India, Vietnam, and China).
- CDC officials note that these data underscore the need to address TB as a severe health threat globally. According to the World Health Organization, approximately one-third of the world's population is infected with the bacteria that cause TB; in 2013, approximately 9 million people became ill with the disease and an estimated 1.5 million people died.[2]

## Severe Impact among Other Populations

- **Individuals living with HIV:** People living with HIV are at high risk for rapid progression to TB disease once infected and are more likely to die during treatment. In 2013, among individuals with TB and a known HIV test result, 7 percent were co-infected with HIV.
- **Homeless:** Those who are homeless are particularly vulnerable to TB; factors such as crowded living situations can increase risk of transmission in this population. In 2013, among individuals with TB aged 15 years or older with a known housing status, 6 percent reported being homeless within the past year.

# Drug Resistance Remains a Serious Challenge

## Multidrug-Resistant TB (MDR TB)

- Cases of multidrug-resistant TB, or MDR TB — defined as TB that is resistant to at least two first-line therapies (isoniazid and rifampin) — are treated with drug regimens that are more difficult for patients to tolerate, lengthier, and more costly than regimens for drug-susceptible TB. MDR TB is also more likely to be fatal than drug-susceptible TB.
- MDR TB accounted for 1.4 percent (95 cases) of TB cases with drug-susceptibility testing completed in 2013. The proportion of cases that were MDR TB has remained relatively steady at approximately 1 to 2 percent in recent years.
- A recent CDC study underscores the serious economic and human costs for treatment of drug-resistant TB. The average direct cost of treatment for an MDR TB case (including drugs, diagnostics, case management, hospitalization) is $134,000, compared with $17,000 to treat drug-susceptible TB. When including the productivity losses faced by patients while undergoing treatment, each MDR TB case costs an average of $260,000 to treat. Patients face the inability to work, long and frequent hospitalizations, home isolation, and even death. Medications can also lead to severe health problems, such as damage to the kidneys, liver, or heart; loss of vision or hearing; and changes in behavior or mood (including depression or psychosis).[3] (See "TB Drug Resistance in the U.S.")

## Extensively Drug-Resistant TB (XDR TB)

- Extensively drug-resistant TB, or XDR TB, is defined as TB that is resistant to at least isoniazid and rifampin among first-line anti-TB drugs, resistant to any fluoroquinolone (e.g., levofloxacin, moxifloxacin, gatifloxacin), and resistant to at least one second-line injectable drug (e.g., amikacin, capreomycin, or kanamycin).
- XDR TB patients have few treatment options because the drugs that are most highly effective against TB will be ineffective against their disease. This problem is amplified in areas of the world with limited access to the full range of anti-TB drugs.
- Four cases of XDR TB were reported in the United States in 2013.
- A recent CDC study shows that the average direct cost of treatment for XDR TB is even higher than for MDR TB, at $430,000 for each case; when including productivity losses faced by patients, the average cost increases to $554,000.[3] (See "TB Drug Resistance in the U.S.")

If you are a member of the news media and need more information, please visit **www.cdc.gov/nchhstp/Newsroom** or contact the News Media Line at CDC's National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention 404-639-8895 or **NCHHSTPMediaTeam@cdc.gov**.

[1] CDC. Trends in Tuberculosis, United States, 2013. *MMWR* 2013; 62(11):201-205.

[2] WHO. Global Tuberculosis Report 2014. Available at: http://www.who.int/tb/publications/global_report/en. Published 2014. (Accessed December 3, 2014)

[3] Marks S, et al. Treatment Practices, Outcomes, and Costs of Multidrug Resistant and Extensively Drug Resistant Tuberculosis in the United States. *Emerg Infect Dis*. 2014; 20(5).